FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB Number: 3235-0076 Expires: Sept. 30,2008 Estimated average burden hours per response.....16.00

≺SEP 1 5 2008

PROCESSED

THOMSON PRITERS

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)		
		908
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	☐ ULOE	Mall Processing Section
A. BASIC IDENTIFICATION DATA		SEP 002008
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Green Ridge Partners H, LLC		Washington, DC
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Numb	er (Including Area Code)
16 Goose Cove Lane, Freeport, ME 04032-6531	207-221-5639	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Numb	per (Including Area Code)
660 Glen Iris Drive, NE, No. 408, Atlanta, GA 30308	404-875-5797	
Type of Business Organization corporation	olease specify):	
Month Year Actual or Estimated Date of Incorporation or Organization: OB OT Actual Estivibuling Estivibuling OT Actual Control Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated : ME	08059707

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: **✓** Promoter General and/or Managing Partner Full Name (Last name first, if individual) Jones, Susan B. Business or Residence Address (Number and Street, City, State, Zip Code) 16 Goose Cove Lane, Freeport, ME 04032-6531 Check Box(es) that Apply: Beneficial Owner Executive Officer ✓ Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Sutherland, M. Stuart Business or Residence Address (Number and Street, City, State, Zip Code) 660 Glen Iris Drive, NE, No. 408, Atlanta, GA 30308 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Community Generation Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 16 Goose Cove Lane, Freeport, ME 04032-6531 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Beneficial Owner Executive Officer Director

General and/or Managing Partner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. I.	NFORMAT	ION ABOU	T OFFERI	NG				-
1.	Has the	issuer sol	d, or does tl	ne issuer i	ntend to se	II, to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No
	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								<u> </u>				
2.									\$_0.00				
3.	Does th	e offering	nermit ioin	t ownershi	in of a sing	le unit?						Yes	No
4.	F								K				
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	d Street, C	ity, State, Z	Zip Code)			-			
Naı	me of As	sociated Ba	roker or Dea	aler									-
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)	*************					••••••	∐ Al	l States
	AL	AK	ĀΖ	ΔR	CA	CO	CT	DE	DC	FL	GA)	HI	ID (VG)
	IL MT	NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	vidual)									
Bus	siness or	Residence	: Address (N	Number an	d Street, C	ity. State.	Zip Code)						
							. ,						
Nai	me of As	sociated Bi	roker or Dea	aler									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)	•••••						☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH		MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV		WY	PR
Ful	I Name (Last name	first, if indi	vidual)									
_		<u> </u>											
Bus	siness or	Residence	: Address (N	≀umber an	d Street, C	ity, State, a	Zip Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
	AL	AK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HL	[ID]
	IL MT	IN NE	IA NV	KS	ΚΥ	I.A	ME	MD	MA ND	MI OH		MS OR	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM) UT)	NY VT	NC VA	WA	WV		WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	S	s
	Other (Specify LLC Membership Interests	\$_10,500.00	\$_10,500.00
	Total		\$ 10,500.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	\$_0.00
	Non-accredited Investors	4	\$_10,500.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s0.00
	Printing and Engraving Costs		<u>\$_0.00</u>
	Legal Fees		\$_0.00
	Accounting Fees		\$_0.00
	Engineering Fees		s_0.00
	Sales Commissions (specify finders' fees separately)	_	§ 0.00
	Other Expenses (identify)		\$ 0.00
	Total		0.00

$\overline{}$					
	b. Enter the difference between the aggregate offering price given in response to Part C and total expenses furnished in response to Part C — Question 4.a. This difference is the proceeds to the issuer."	'adjusted gross	10,500.00		
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed each of the purposes shown. If the amount for any purpose is not known, furnish ar check the box to the left of the estimate. The total of the payments listed must equal the proceeds to the issuer set forth in response to Part C — Question 4.b above.	estimate and			
		Payments to Officers, Directors, & Affiliates	Payments to Others		
	Salaries and fees	\$	\$		
	Purchase of real estate	[] \$	_ 🗆 \$		
	Purchase, rental or leasing and installation of machinery		m.c		
	and equipment	<u>—</u>	_		
			- ∐³		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	П.	□ \$		
	Repayment of indebtedness				
	Working capital	_			
	Other (specify):	_	_		
		🗀 \$	_ [\$		
	Column Totals	<u>\$</u> 0.00	\$10,500.00		
	Total Payments Listed (column totals added)	s_	s_10,500.00		
	D. FEDERAL SIGNATURE		···		
sig	ne issuer has duly caused this notice to be signed by the undersigned duly authorized person gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Excl e information furnished by the issuer to any non-accredited investor pursuant to paragra	nange Commission, upon writ			
- Iss	suer (Print or Type)	Date			
	ireen Ridge Partners H, LLC	September 2, 2	2008		
Na	ame of Signer (Print or Type) Title of Signer (Print or Type)				
M.	. Stuart Sutherland Vice President, Secretary and T	reasurer			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION —